

Conceptualising Personality Disorder in Youth Controversies, Challenges and a Way Forward

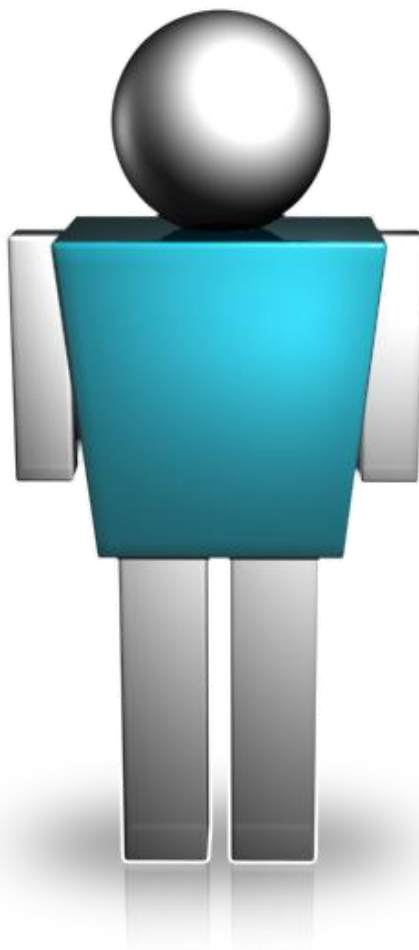
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Benjamin



Personality disorder...

“...an **enduring** pattern of inner experience and behaviour that **deviates markedly** from the expectations of the individuals culture, is pervasive and inflexible, has an **onset in adolescence** or early adulthood, is **stable** over time, and leads to **distress or impairment**”
(DSM-IV, APA, 1994, p. 629)”

glibness and superficial charm
grandiose sense of self worth

lack of remorse or guilt

shallow affect

cold, lack of empathy

need for
stimulation/proneness to
boredom

irresponsibility

impulsivity

parasitic lifestyle

lack of realistic, long-term
goals

Affective

Impulsive and
Irresponsible Behaviour

In

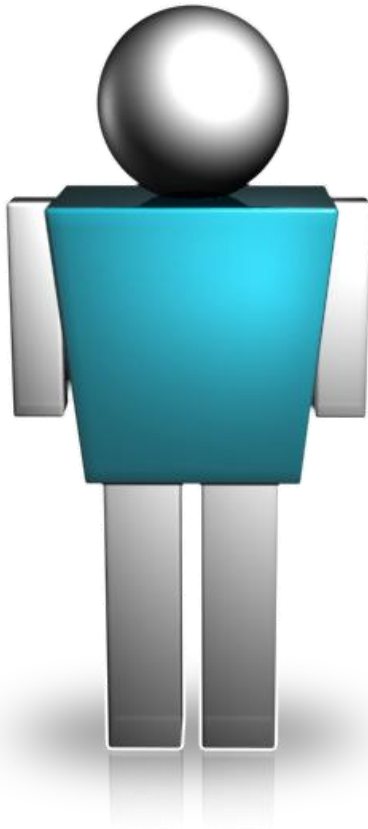
Techn

MHS

Utility of the construct...



A CAMHS view on Benjamin



- Attention Deficit Hyperactivity Disorder
- Aspergers Syndrome
- Conduct Disorder

Some Limitations

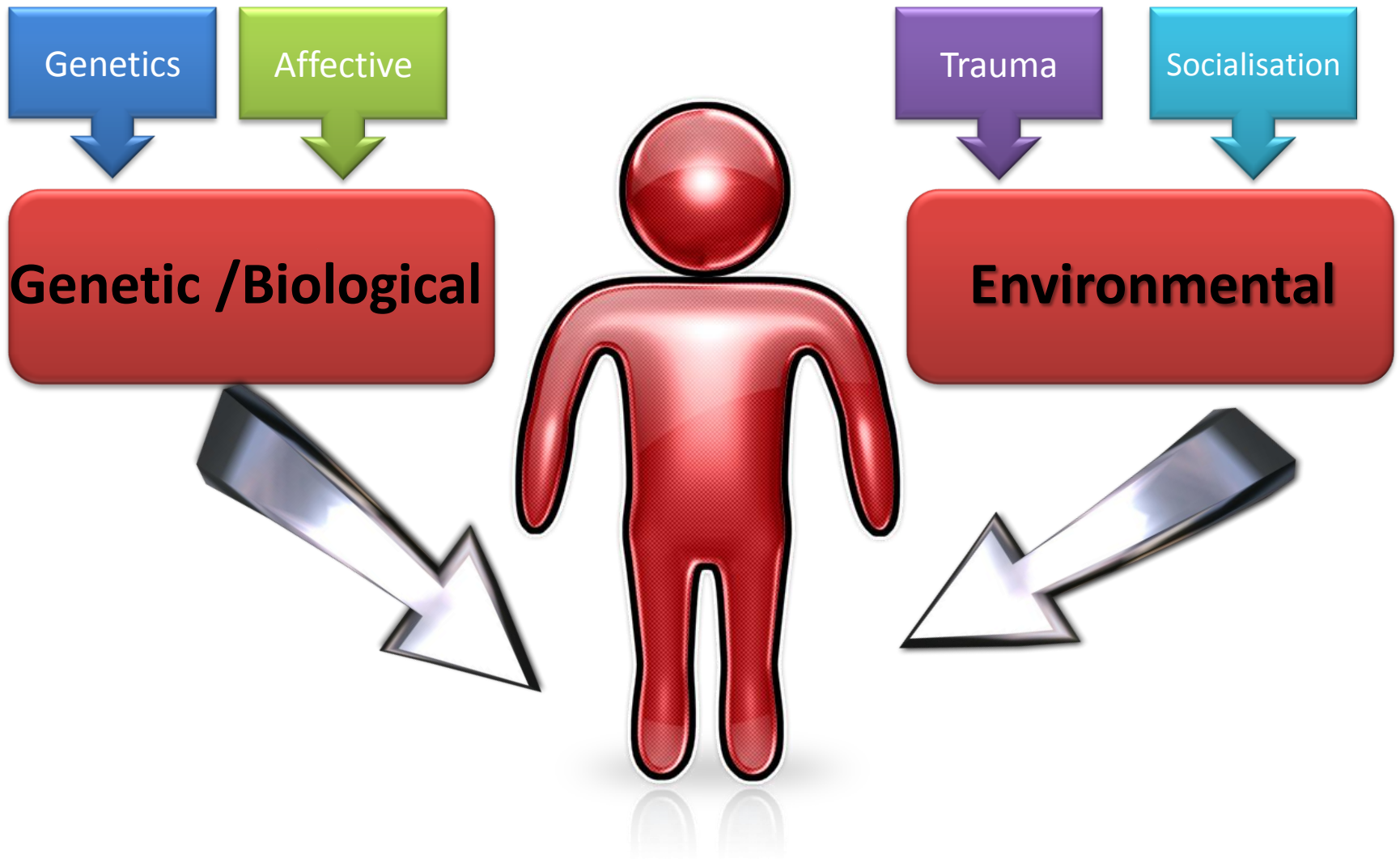
- Diagnoses provide a *very* poor fit for the presenting problem;
- Diagnosis lacks specificity in terms of:
 - understanding risk,
 - treatment needs,
 - developmental trajectory

**Rationale for extending the
construct downwards to youth?**

“psychopathy does not suddenly spring, unannounced, into existence in adulthood. The precursors...first reveal themselves early in life” Hare (1994)



Identify **causal factors and processes**



Prevention...



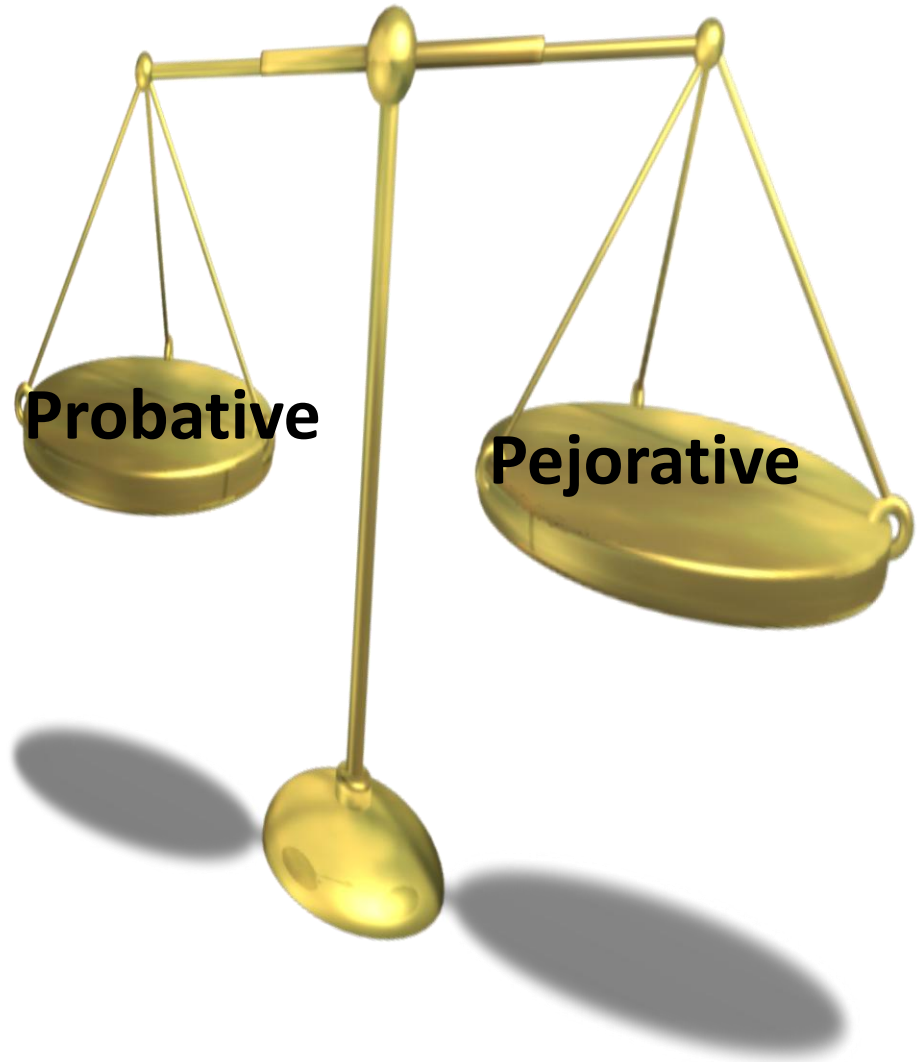
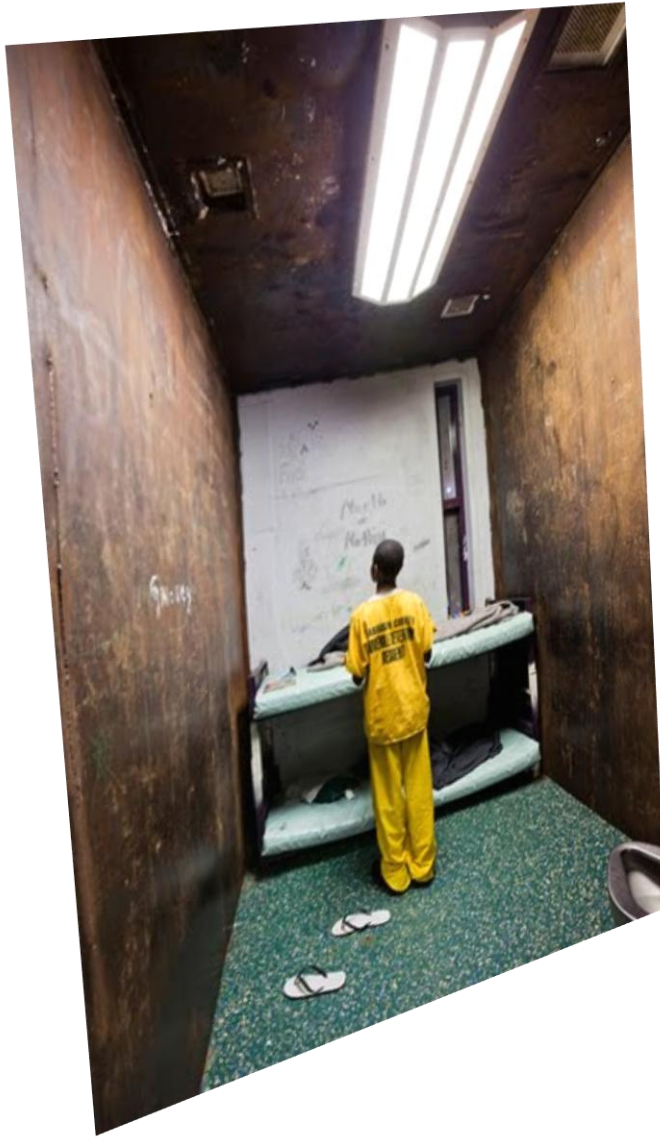
Prospect of changing trajectories



Understanding Youth Violence



Disposals: Juvenile Life Without Parole

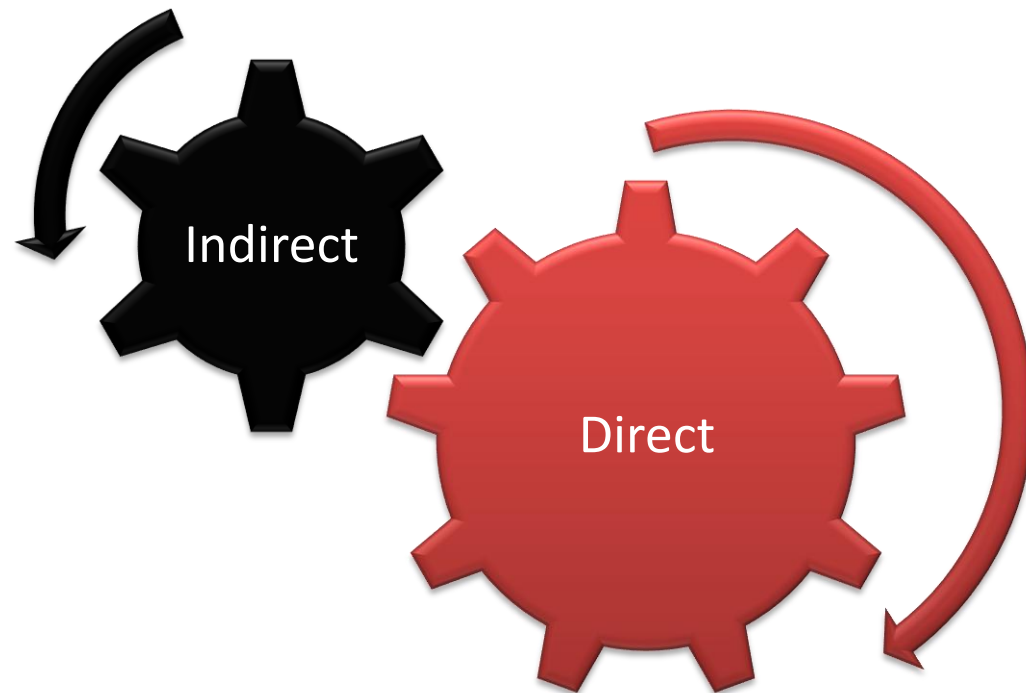


For treatment effects...

The Attachment Disordered child has had so little contact or has been able to experience contact to the degree where it becomes unable to form lasting mutual relationships. This is probably why normal psychotherapy (which is always based on the mutual emotional relationship between client and therapist) often fails with these clients...The beginner who valiantly sets out to prove that he or she can “break through” to the emotions of the child inevitably wastes much good time....Therapy with AD children...is a question of recognising the fact that early deprivation can slow down or sometimes arrest psychological and social development in a child. However, a child arrested in the early phases of development may progress more or less according to the therapeutic environment”

Is it feasible?

Source of Evidence

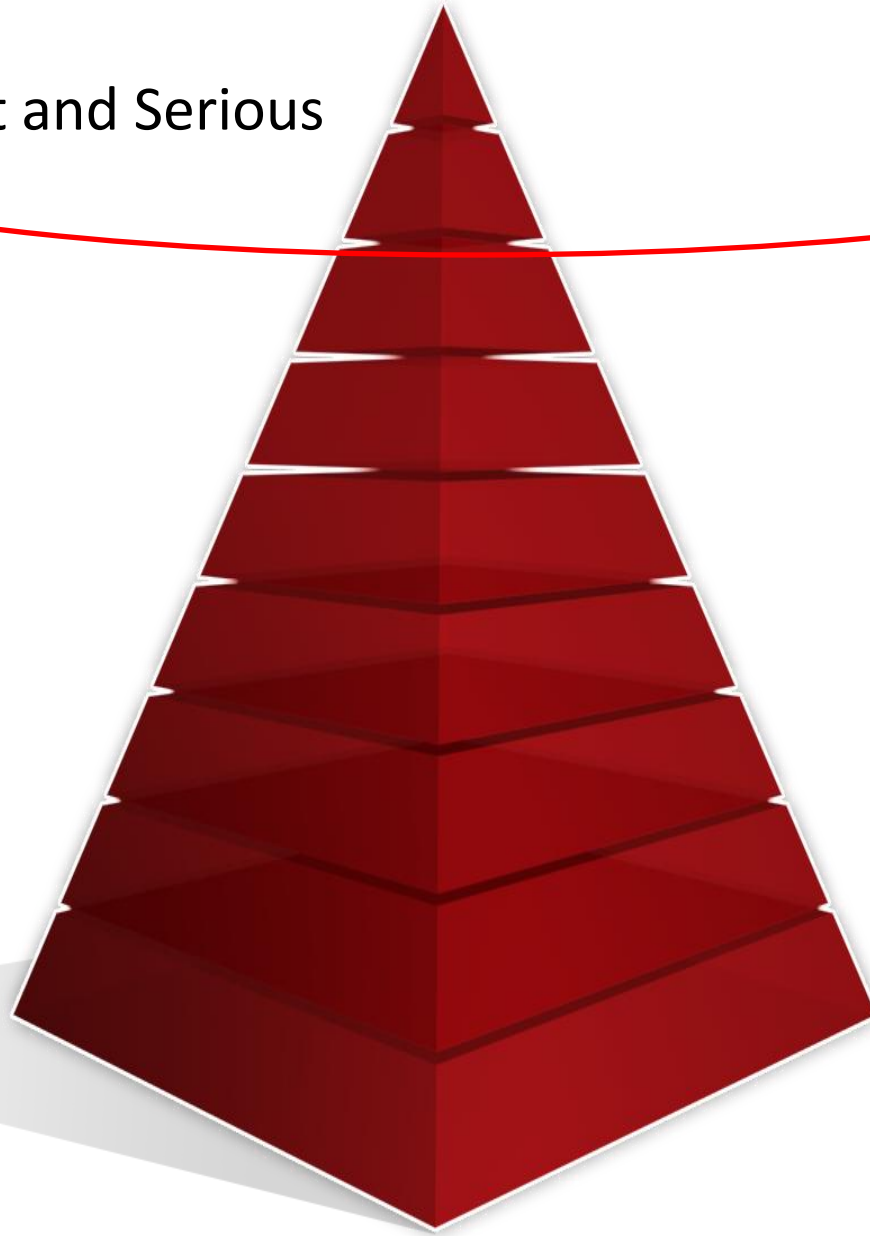


Indirect Links

Conduct Disorder: A Caricature

“he is like a “Jekyll and Hyde”. Sometimes he can be sweet , charming, loving, easy to get along with, he’s a very good natured child. But then there’s the other side of him which emerges – an angry, hostile, aggressive, hurting child, who will do violent things to try to get his own way. He is rough with animals and mean with little children, and he is very non-compliant” (p. 52)

Persistent and Serious



- Temperamental stability (Block, 1993; Caspi, 2000)
- Other mental disorders are identifiable in childhood e.g., anxiety, eating, psychotic disorders.

But,

- Prospective research shows as many as 50 to 85% of children desist in their delinquency
- There is not absolute continuity in temperament
- Developmental factors influence the expression of symptoms of disorder

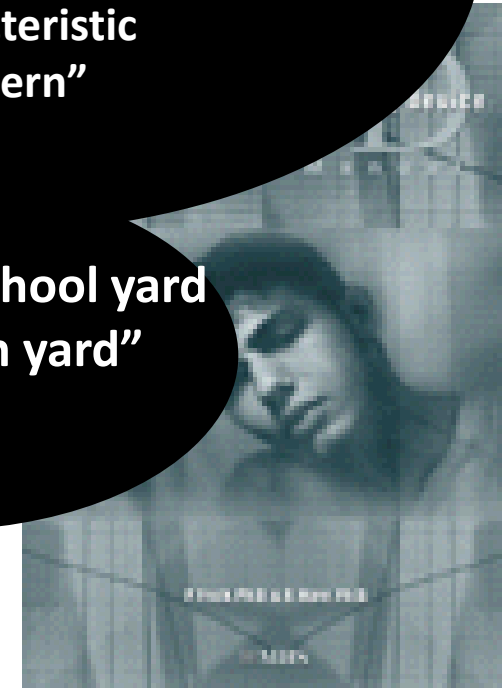
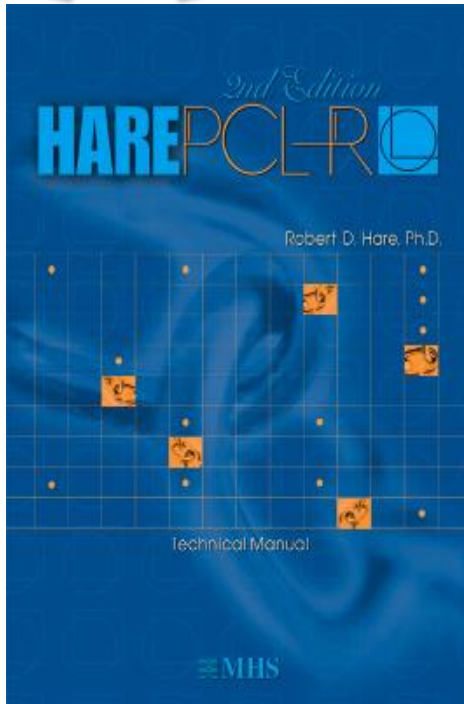
Thus, we need direct evidence...

Direct

Importation

“the APSD screens for Antisocial Personality Disorder or psychopathy. The child is rated on a dimensional scale that probes the characteristic psychopathic pattern”

“from the school yard to the prison yard”
(MHS)



Modified to
reflect
adolescents



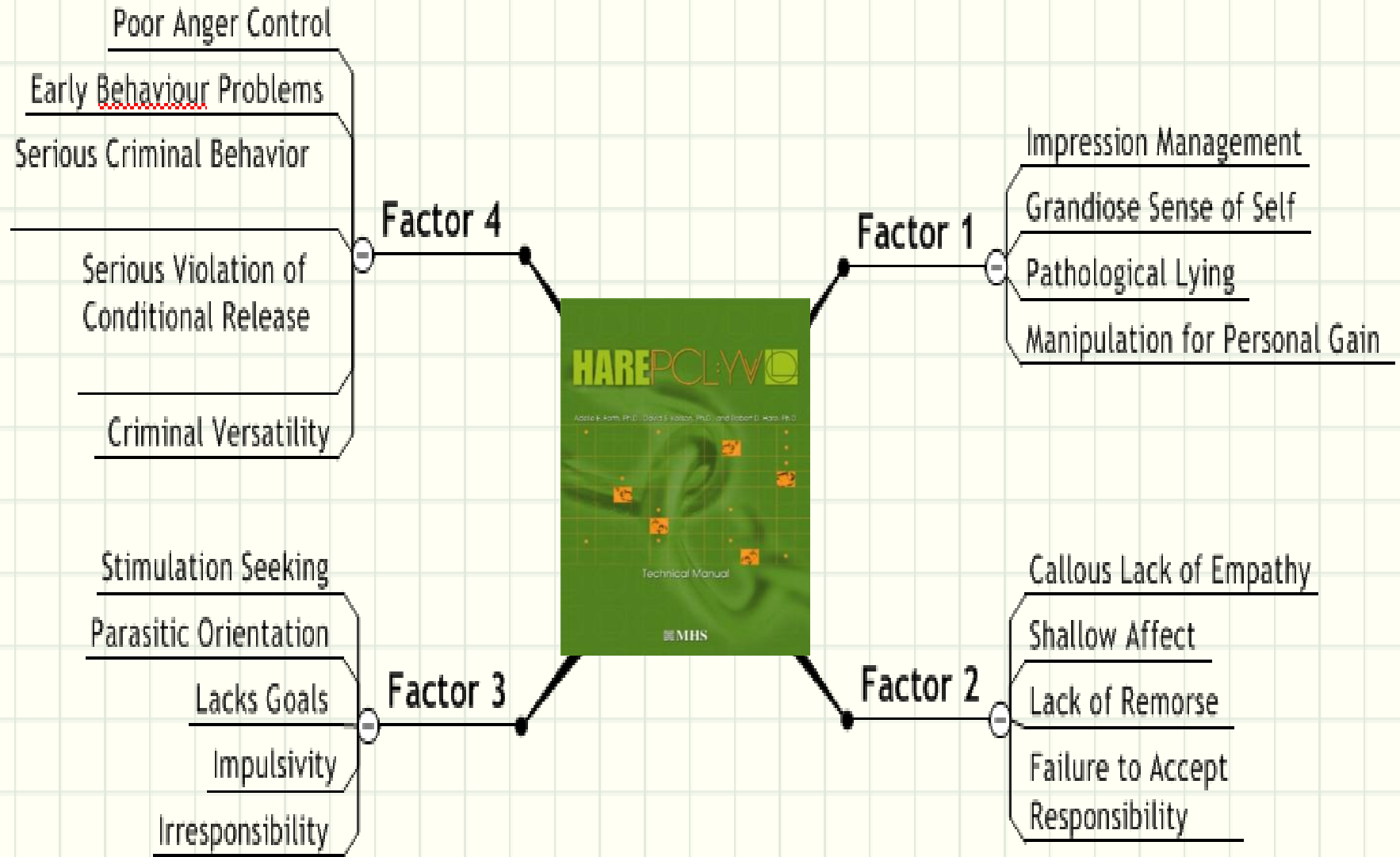
Influence of
peers, family,
school



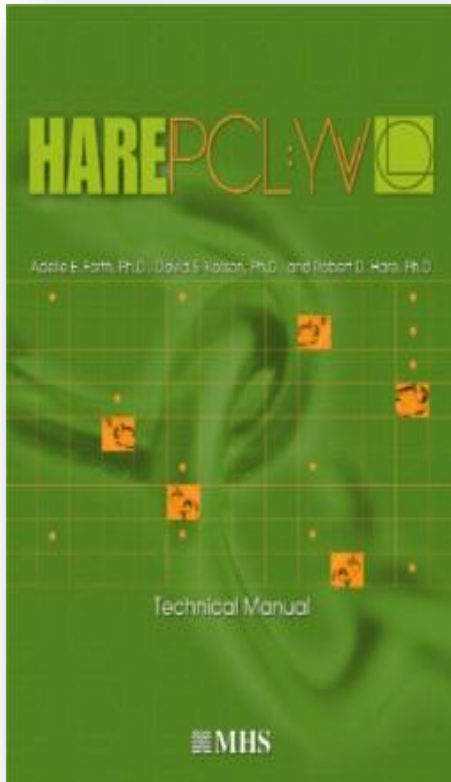
Age
Appropriate



Enduring

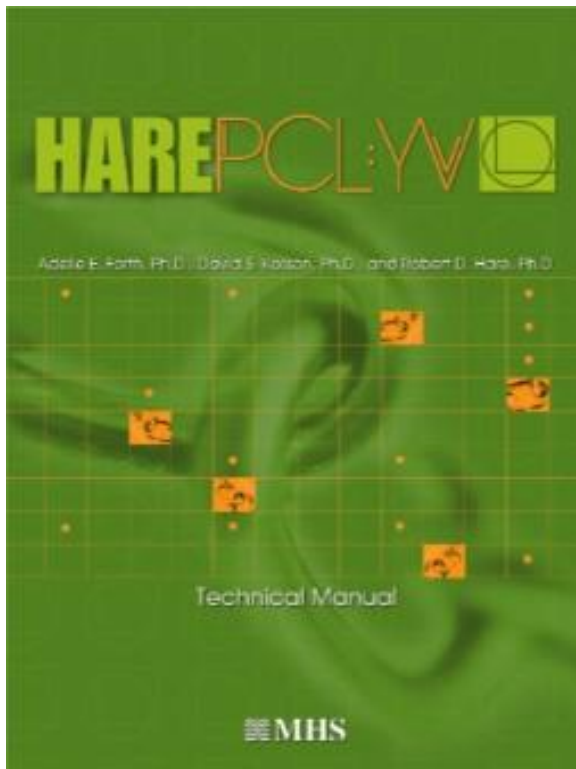


Reliability

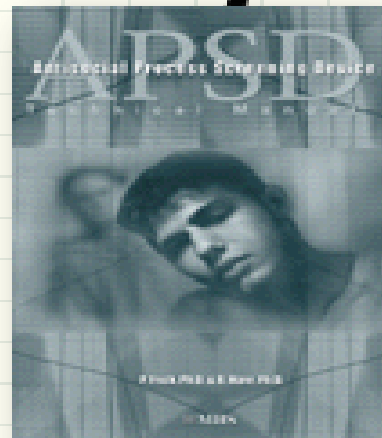


- Inter-rater reliability (19 samples , institutionalised and community, >2400 youth)
- Wide range of scores and considerable dispersion
- Higher mean scores in institutionalised samples
- Acceptable reliability (although varied across items)

Validity



- Overlap with other measures : ASPD , IMP, PPI and Conduct Disorder
- Correlated with Narcissism but not Avoidant PD
- Correlated with Alcohol and Substance Use, ADHD, self-harm
- Negative correlated with Anxiety and Depression
- Antisocial behaviour - age of onset, severity, frequency of offence, etc.
- Family factors /Parenting/Trauma
- Treatment Responsivity
- Stability
- 3 Factor Model



Impulsivity

- Blames others without thinking
- Acts without thinking of consequences
- Gets bored easily
- Engages in risk or dangerous activities
- Does not plan ahead or leaves things to the last minute

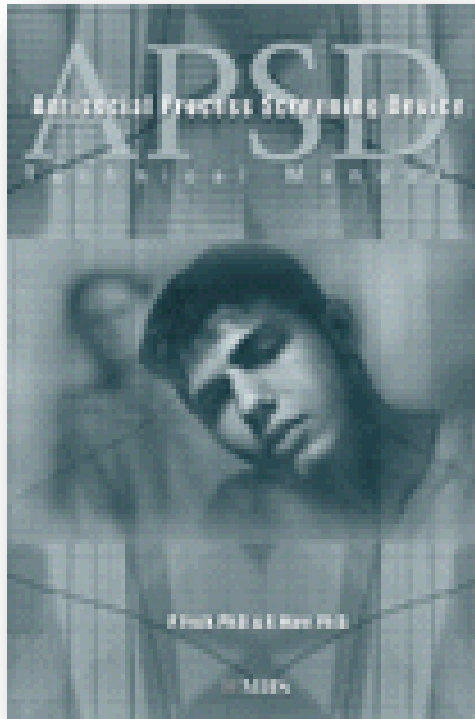
Narcissism

- His/Her emotions seem shallow and insincere
- Brags excessively about his/her accomplishments or possessions
- Uses or "cons" others to get what he or she wants
- Teases or makes fun of other people
- Can be charming but in ways that seem insincere
- Becomes angry when corrected
- Seems to think he or she is better than other people

Callous-Unemotional

- Is concerned about how he/she does at school
- Is good at keeping promises
- Feels bad or guilty when he/she does something wrong
- Is concerned about the feelings of others
- Does not show feelings or emotions
- Keeps the same friends

Validity



- More severe conduct problems
- Higher scores on measures of thrill and adventure seeking
- Lower sensitivity to cues to punishment when a reward-oriented response set is primed
- Lower levels of reactivity to threatening and emotionally distressing stimuli
- Less distress to negative effects of their behaviour on others
- ability to recognize fearful and sad facial expressions and sad vocal tones
- Impairments in moral reasoning and empathic concerns towards others
- Maladaptive dimensions of narcissism

1. **Lack of Remorse or Guilt:** Does not feel bad or guilty when he/she does something wrong (exclude remorse when expressed only when caught and/or facing punishment). The individual shows a general lack of concern about the negative consequences of his or her actions. For example, the individual is not remorseful after hurting someone or does not care about the consequences of breaking rules. The person rarely admits to being wrong and typically blames others for any negative consequences which result from his or her actions.
2. **Callous-Lack of Empathy:** Disregards and is unconcerned about the feelings of others. The individual is described as cold and uncaring. The person appears more concerned about the effects of his or her actions on him or herself, rather than their effects on others, even when they result in substantial harm to others.
3. **Unconcerned about Performance:** Does not show concern about poor/problematic performance at school, work, or in other important activities. The individual does not put forth the effort necessary to perform well, even when expectations are clear, and typically blames others for his or her poor performance.
4. **Shallow or Deficient Affect:** Does not express feelings or show emotions to others, except in ways that seem shallow, insincere, or superficial (e.g., actions contradict the emotion displayed; can turn emotions “on” or “off” quickly) or when emotional expressions are used for gain (e.g., emotions displayed to manipulate or intimidate others).

Challenges and Controversies

PCL-R ≠ Psychopathy

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Is Criminal Behavior a Central Component of Psychopathy? Conceptual Directions for Resolving the Debate

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The development of the Psychopathy Checklist—Revised (PCL-R; R. D. Hare, 2003) has fueled intense clinical interest in the construct of psychopathy. Unfortunately, a side effect of this interest has been conceptual confusion and, in particular, the conflating of measures with constructs. Indeed, the field is in danger of equating the PCL-R with the theoretical construct of psychopathy. A key point in the debate is whether criminal behavior is a central component, or mere downstream correlate, of psychopathy. In this article, the authors present conceptual directions for resolving this debate. First, factor analysis of PCL-R items in a theoretical vacuum cannot reveal the essence of psychopathy. Second, a myth about the PCL-R and its relation to violence must be examined to avoid the view that psychopathy is merely a violent variant of antisocial personality disorder. Third, a formal, iterative process between theory development and empirical validation must be adopted. Fundamentally, constructs and measures must be recognized as separate entities, and neither reified. Applying such principles to the current state of the field, the authors believe the evidence favors viewing criminal behavior as a correlate, not a component, of psychopathy.

Keywords: psychopathy, criminal behavior, construct validity, violence risk assessment

Over the past decade, there has been an explosion of research on psychopathic personality disorder. Although several groups of investigators have focused on the etiology, manifestations, and treatment of psychopathy, much research—and virtually all prac-

are derived (see Edens, Skeem, Cruise, & Cauffman, 2001). One proponent asserted that, once the PCL-R “emerged, it was the first time in history that everyone who said ‘psychopath’ was saying the same thing. For research in the field, it was like a starting gun”

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ORIGINAL ARTICLE

Limitations of Diagnostic Precision and Predictive Utility in the Individual Case: A Challenge for Forensic Practice

David J. Cooke · Christine Michie

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Abstract Knowledge of group tendencies may not assist accurate predictions in the individual case. This has importance for forensic decision making and for the assessment tools routinely applied in forensic evaluations. In this article, we applied Monte Carlo methods to examine diagnostic agreement with different levels of inter-rater agreement given the distributional characteristics of PCL-R scores. Diagnostic agreement and score agreement were substantially less than expected. In addition, we examined the confidence intervals associated with individual predictions of violent recidivism. On the basis of empirical findings, statistical theory, and logic, we conclude that predictions of future offending cannot be achieved in the individual case with any degree of confidence. We discuss the problems identified in relation to the PCL-R in terms of the broader relevance to all instruments used in forensic decision making.

There is an important disjunction between the perspective of science and the perspective of the law; while science seeks universal principles that apply across cases, the law seeks to apply universal principles to the individual case. Bridging these perspectives is a major challenge for psychology (Fagman, 2007). It is recognized by statisticians that knowledge of group tendencies—even when precise—

the mean of a distribution tells us about everyone, yet no one. This has serious implications for the use of psychological tests in forensic decision making. To illustrate these limitations, we focus on one of the most widely used, and perhaps the most extensively validated, test in the forensic arena—the Psychopathy Checklist Revised (PCL-R¹; Hare, 2003). We emphasize, however, that all psychological tests used in the same way in the forensic arena will suffer from similar limitations (e.g., VRAG, Quinsey, Harris, Rice, & Cormier, 1998; Static-99, Hanson & Thornton, 1999; COVR, Monahan et al., 2005).

Mental health professionals are frequently asked to opine whether an individual might be violent in the future; psychopathic personality disorder is an important risk factor to consider (Hart, 1998). The PCL-R is the most frequently used measure of psychopathic personality disorder; it has been described as the “gold standard” for that purpose (Edens, Skeem, Cruise, & Cauffman, 2001; as cited in Hare, 2003). There can be little doubt that the PCL-R has made a major contribution to our understanding of violence (Hart, 1998); nonetheless, it is important for the field to consider both its strengths and its limitations. Findings for this instrument will have implications for less well-validated tools. In this introduction, we consider two issues; first, the use of PCL-R scores in forensic practice and second, the general problem of the precision of predictions about an individual case.

PCL-R is a fallible measure

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DO SOME EVALUATORS REPORT CONSISTENTLY HIGHER OR LOWER PCL-R SCORES THAN OTHERS?

Findings From a Statewide Sample of Sexually Violent Predator Evaluations

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Darrel B. Turner
Sam Houston State University

Daniel C. Murrie
University of Virginia

This study examined whether some evaluators tend to report consistently higher or lower scores than other evaluators for offenders on the Psychopathy Checklist–Revised (PCL–R; R. D. Hare, 1991, 2003). Data for the study were PCL–R total scores for 321 sex offenders, evaluated by 1 or more of 20 different state-contracted evaluators, during a process of screening for civil commitment as sexually violent predators. More than 30% of the variability in PCL–R scores was attributable to differences among evaluators, with mean PCL–R scores given by 2 of the most prolific evaluators differing by almost 10 points. In a subsample of 22 offenders evaluated with the PCL–R on 2 or more occasions, evaluator agreement (intraclass correlation_{A,1} = .47) was low. Together, these findings raise concerns about the field reliability of the PCL–R and suggest the need for research examining field reliability of other measures used in forensic assessment.

Keywords: PCL–R, rater agreement, sexually violent predator, evaluator differences, measurement error

On Individual Differences in Person Perception: Raters' Personality Traits Relate to Their Psychopathy Checklist–Revised Scoring Tendencies

Audrey K. Miller¹, Katrina A. Rufino¹, Marcus T. Boccaccini¹,
Rebecca L. Jackson², and Daniel C. Murrie³

Abstract

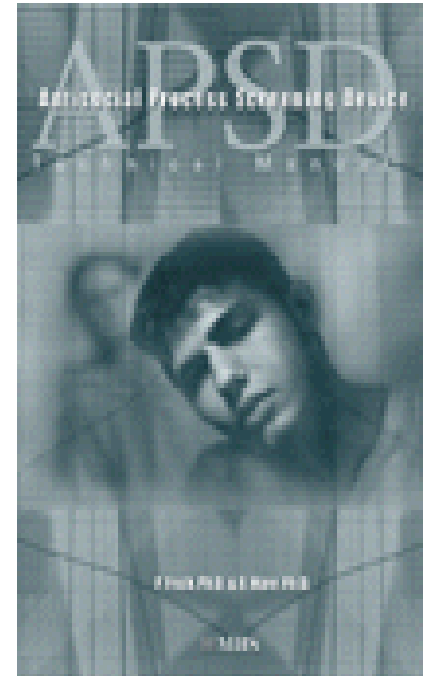
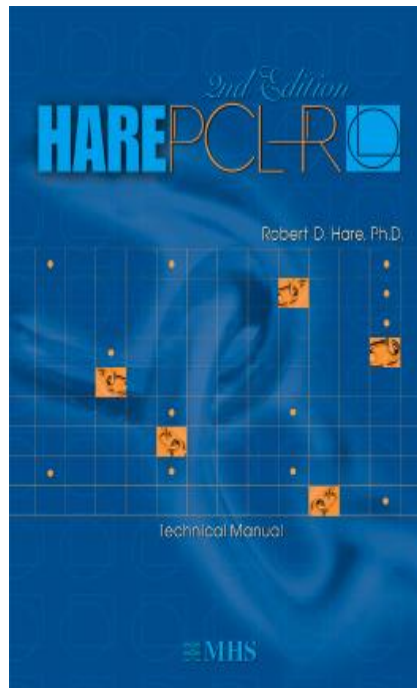
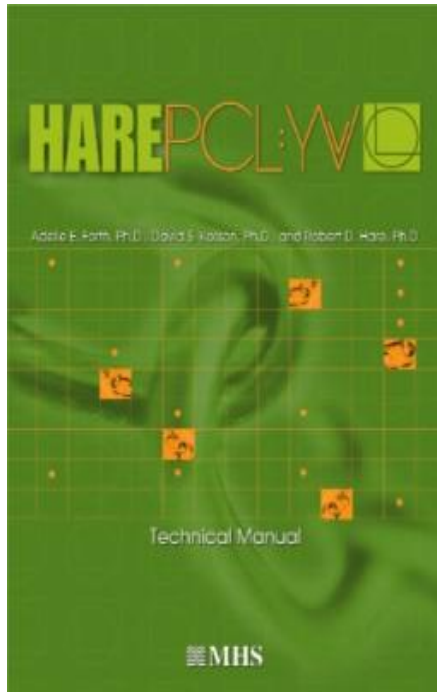
This study investigated raters' personality traits in relation to scores they assigned to offenders using the Psychopathy Checklist–Revised (PCL–R). A total of 22 participants, including graduate students and faculty members in clinical psychology programs, completed a PCL–R training session, independently scored four criminal offenders using the PCL–R, and completed a comprehensive measure of their own personality traits. A priori hypotheses specified that raters' personality traits, and their similarity to psychopathy characteristics, would relate to raters' PCL–R scoring tendencies. As hypothesized, some raters assigned consistently higher scores on the PCL–R than others, especially on PCL–R Facets 1 and 2. Also as hypothesized, raters' scoring tendencies related to their own personality traits (e.g., higher rater Agreeableness was associated with lower PCL–R Interpersonal facet scoring). Overall, findings underscore the need for future research to examine the role of evaluator characteristics on evaluation results and the need for clinical training to address evaluators' personality influences on their ostensibly objective evaluations.

Keywords

forensic assessment, forensic evaluation, rater personality, psychopathy assessment, NEO PI–R, PCL–R, clinical forensic training

Assessment
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Administration/Interpretation



Taxon

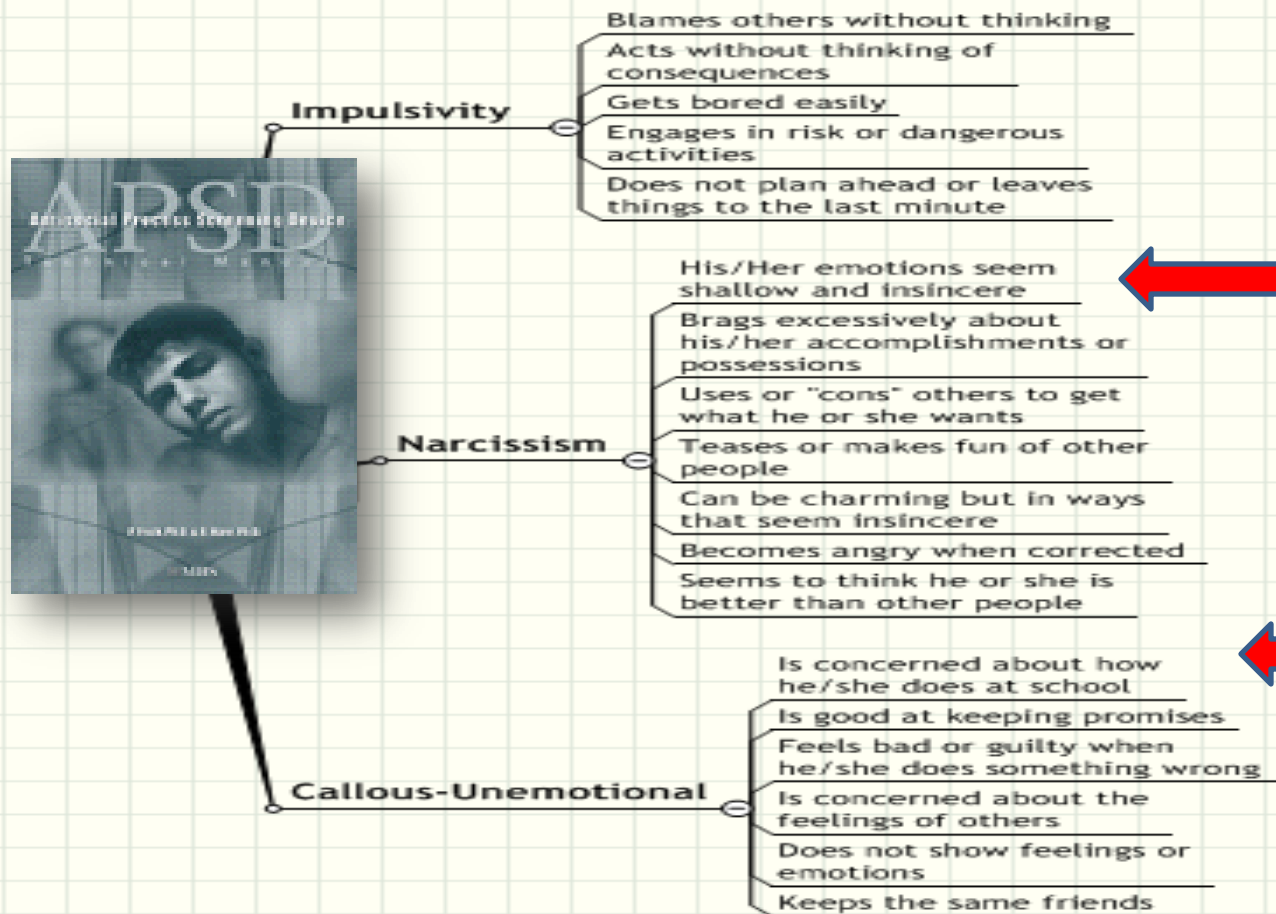


Dimensional



Dimensional

Factor Structure



Developmental Dilemmas



What is normal?



Transient Developmental Phenomena

“Transient Developmental Phenomena”

Arrogant and Deceitful OR Immature theory of mind, egocentrism

Impulsive and Irresponsible OR normal “ sensation seeking and lack of consequential thinking

Deficient Affective Experience OR Egocentrism

Developmental Manifestations Across the Lifespan

Homotypic vs. Heterotypic Continuity

The undercontrolled child who has daily temper tantrums in early childhood may refrain from this behaviour as an adult. But, if he emerged into adulthood as a man who is irritable and moody, we may grant that the surface behaviour has changed but claim that the underlying personality type has not. Although the form of behaviour changes over time, the course of personality development is said to evidence coherence if the qualities of behaviour are preserved over time (p. 168)

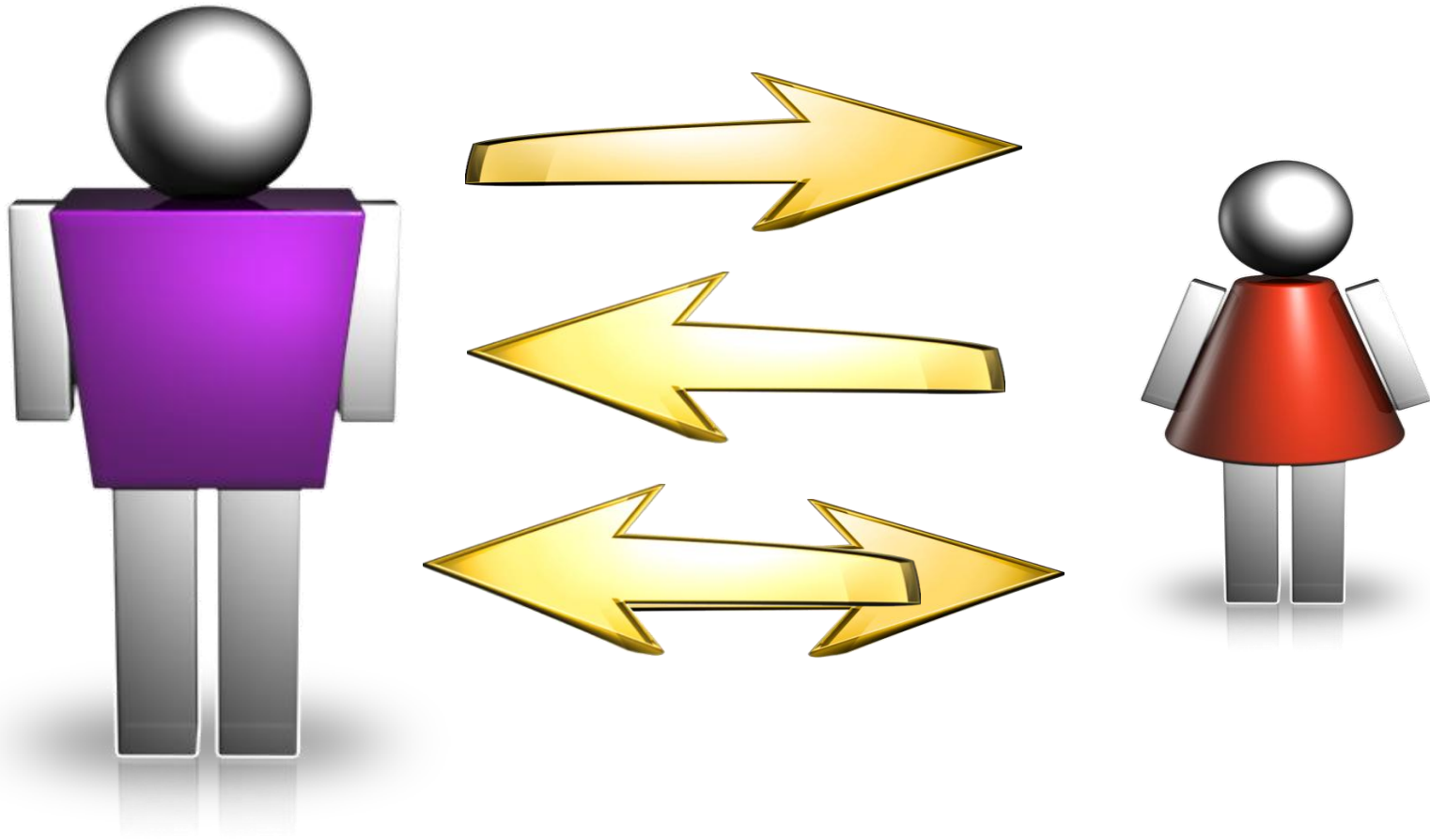
Caspi (2000)

Understanding etiology

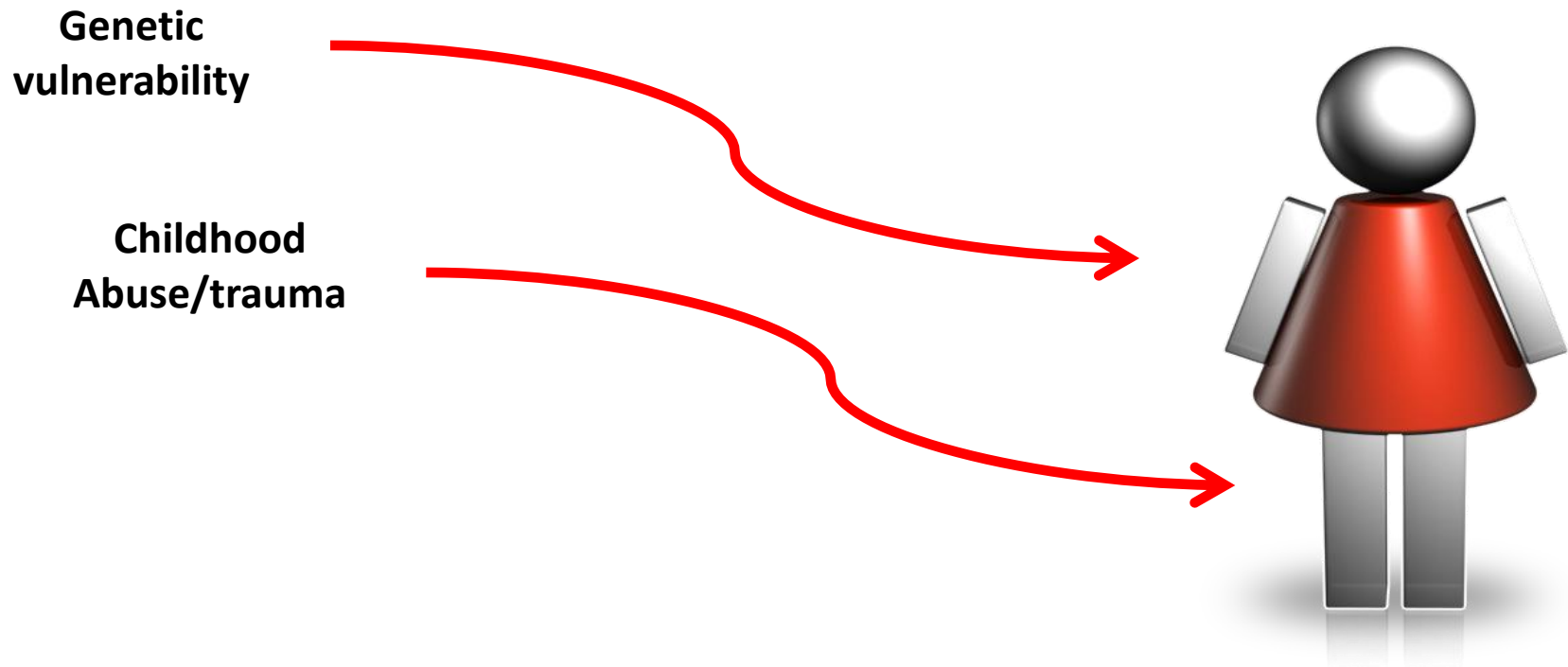
- E.g., inductive parenting

Induction has been described as the process whereby parents use their children's acts of inappropriate or unacceptable social behaviour as an opportunity to teach, inform, and reason with the child about their behaviour (Hoffman, 1970). Effective induction types include: other-oriented inductive messages that focus on the consequences of the child's action on the behaviour and feelings of others, and information about the principles and moral prohibitions about the behaviour (Hoffman, 1970, Zahn-Waxler et al., 1979)

Direction and Strength of Effects

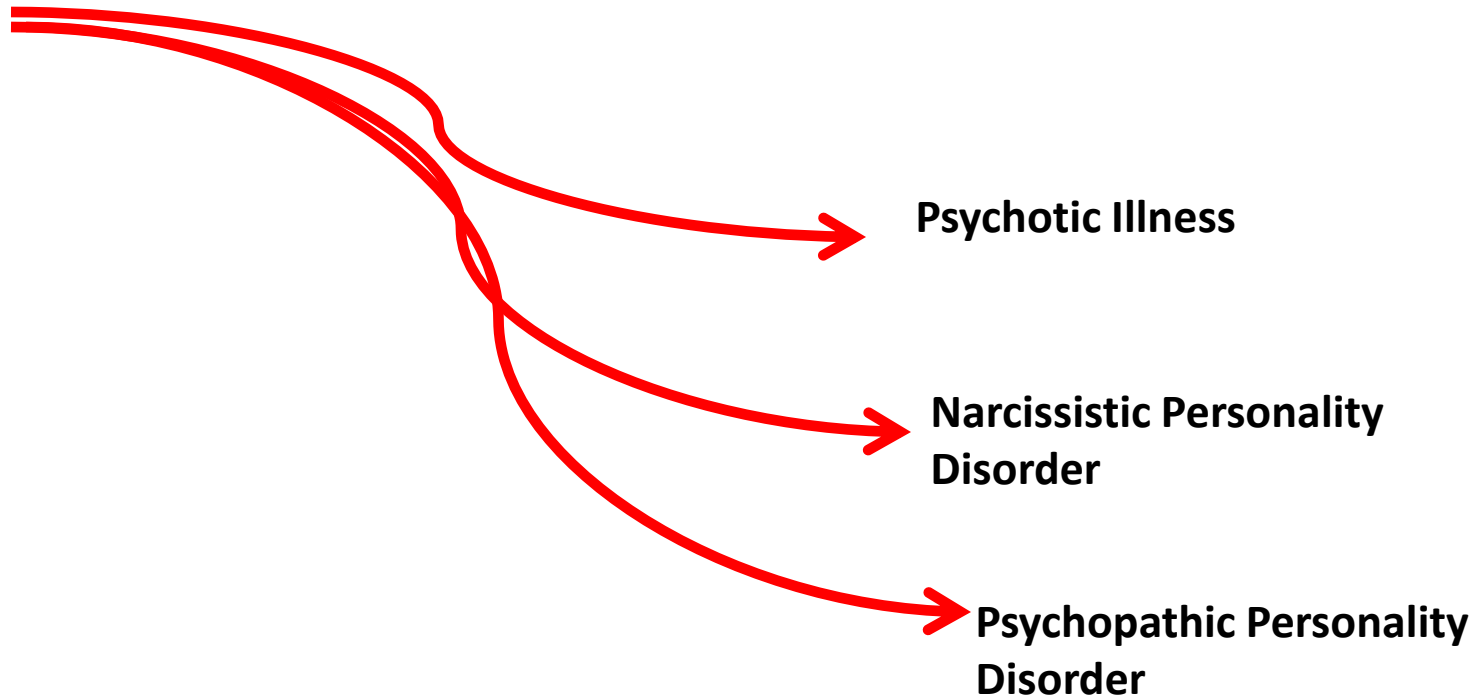


Equifinality and Multifinality



Equifinality and Multifinality

**Lack of
empathy**



Stability and Change

If the psychopathy construct is to prove useful for youth, one can argue that evidence needs to show that it is relatively stable over time, into adulthood, and that it has some predictive validity

Limitations

- Rank Order Stability (correlations across time)
- Mean –Level Stability (average trait of the population is maintained over time)

Both overlook individual variations

- Ipsative Stability (stability in an individual across time – configurational change)

Identifying Youths at Risk for Institutional Misconduct: A Meta-Analytic Investigation of the Psychopathy Checklist Measures

John F. Edens
Southern Methodist University

Identifying a youth at risk for institutional misconduct is an important clinical decision assessed via the Psychopathy Checklist: Youth Version (PCL:YV) among youths in institutional settings, such as psychiatric hospitals and juvenile detention centers. Aggregating research on the predictive utility of the PCL:YV across physically violent and nonviolent youths is an important step in understanding the utility of the PCL:YV in institutional settings.

The present meta-analysis examined the predictive utility of the PCL:YV in institutional settings. The results indicate that the PCL:YV is a valid measure of institutional misconduct risk in youths. The findings have implications for clinical decision-making in institutional settings.

Keywords: psychopathy, institutional misconduct, PCL:YV, juvenile delinquency, risk assessment

John F. Edens, Department of Psychology, Southern Methodist University, and Justin S. Campbell, Department of Mental Health Law & Policy, University of South Florida.

We thank Pamela S. Edens, PhD, for her help in coding the data for this study.

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Meta-analysis of 15 samples (N=1310)

Institutional misconduct (total, aggressive, physically violent)

“Failure to consider the totality of the extant research may lead to inflated perceptions of the predictive utility of juvenile psychopathy measures in institutional settings” (p. 13)

al., 2003; cf. Murrie, Cornell, & McCoy, 2005), its application to youths raises concerns about the extent to which psychopathy scales can improve clinical decision-making in applied settings (Hoge, 2002; see also Simourd & Hoge, 2000). In relation to the prediction of institutional adjustment difficulties, it is noteworthy that the development and validation of measures and classification procedures for juveniles (see, e.g., Hoge, 2002; Le Blanc, 2002) generally has lagged behind the adult corrections literature (see, e.g., Austin & McGinnis, 2004;

Psychopathy in Adolescence and Criminal Recidivism in Young Adulthood

Longitudinal Results From a Multiethnic Sample of Youthful Offenders

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Very few studies to date have examined the long-term predictive validity of psychopathy among juveniles. The current study reports general and violent recidivism rates for a nationally heterogeneous sample of male offenders (n = 75) who had been assessed with the Psychopathy Checklist: Youth Version (PCL: YV) in 1996 when they were 16 years of age. Neither total scores nor factor scores of the PCL: YV predicted violent reconvictions throughout this time frame. These modest effects raise concerns about the utility of psychopathy as a risk factor for future violence, particularly among multiethnic offender samples.

Keywords: PCL: YV; recidivism; juvenile psychopathy; longitudinal

Psychopathic personality disorder (psychopathy) represents a distinctive cluster of affective, interpersonal, and behavioral characteristics (Cleckley, 1976; Hare, 2003) that define a construct of great interest to researchers, practitioners, and policy makers. Applied interest in this construct, which typically is operationalized using the Psychopathy Checklist-Revised (PCL-R; Hare, 2003), is at least in part driven by research suggesting that it correlates with various negative life outcomes among adults, such as poor institutional adjustment, community violence, and criminal recidivism (Douglas, Strand, Belfrage, Fransson, & Levander, 2005; Gendreau, Goggin, & Smith, 2002; Guy, Edens, Anthony, & Douglas, 2005; Skeem & Mulvey, 2001; Walters, 2003). Moreover, there is some evidence suggesting that psychopathy alone may predict these types of outcomes as well as more elaborate risk assessment instruments (e.g., Cooke, Michie, & Ryan, 2001; Edens, Skeem, & Douglas, 2006; cf. Gendreau et al., 2002).

It is not surprising that in recent years considerable research efforts have been devoted to quantifying

psychopathic traits (or at least their developmental precursors) in samples of children and adolescents. This is evident in the proliferation of "youth psychopathy" instruments and the growing body of research suggesting that these scales tend to correlate to some extent with various indicators of social deviance (for overviews, see Petrila & Skeem, 2003; Skeem & Petrila, 2004; see also Salekin & Frick, 2005). In addition, anecdotal evidence suggests that the Psychopathy Checklist: Youth Version (PCL: YV; Forth, Kosson, & Hare, 2003) in particular is being used increasingly to inform clinical and legal decision making in the juvenile and criminal justice systems (Skeem, Cauffman, & Nold, 2002; Zinger & Forth, 1998; see also Grinberg, 2006).

The increasing applied use of the youth psychopathy construct has not progressed without various reservations being voiced (Edens, 2006; Edens & Petrila, 2006; Edens, Skeem, Cruise, & Cauffman, 2001; Zinger & Forth, 1998). For example, some (e.g., Edens et al., 2001; Edens, Guy, & Fernandez, 2003) have raised concerns about the stigmatizing nature of the traits attributed to psychopathy, particularly the applied use of those traits

10 year follow-up of 75 male offenders

Neither total nor factor scores predicted general or violent reconvictions

Youth Psychopathy and Criminal Recidivism: A Meta-Analysis of the Psychopathy Checklist Measures

John F. Edens · Justin S. Campbell · John M. Weir

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Abstract Although narrative reviews have suggested that “youth psychopathy” is a strong predictor of future crime and violence, to date no quantitative summary meta-analysis has been conducted. We meta-analyzed recidivism data for the Psychopathy Checklist-Revised (PCL-R) across 21 non-overlapping samples of male and female juvenile offenders. Psychopathy was significantly associated with general and violent recidivism ($r = .24$ and $r = .25$, respectively), but negligibly related to sexual recidivism ($r = .01$). This low base rate outcome. Even after eliminating outliers, however, the association remained. It was noted among the effects, with some of this variability being due to differences in the ethnic composition of the samples. Effect sizes for the small number of studies for analysis were mostly small and nonsignificant, and psychopathy was not significantly associated with violent recidivism among more ethnically heterogeneous samples. In general, and violent recidivism, psychopathy performed comparably to other risk factors. Specifically to assess risk, the Youth Level of Service/Case Management Inventory (YLS/CMI; Andrews, 2002).

Keywords Psychopathy · Juveniles · Recidivism · Gender · Ethnicity

Psychopathic personality disorder (psychopathy) represents a cluster of personal, and behavioral characteristics (Cleckley, 1976; Hare, 2003). The construct of theoretical and practical significance. Of particular interest to policy makers is the demonstrated association between psychopathy and socially undesirable outcomes, such as community violence and criminal behavior. It has been evident in several large-scale studies and meta-analytic reviews

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Meta-analysis of recidivism data across 21 samples of juvenile offenders

P significantly associated with general and violent recidivism ($r = .24$ and $r = .25$) but negligibly with sexual recidivism

Considerable heterogeneity with some variance explained by gender and ethnicity of samples

‘Associated but ES’s low’

TREATMENT RESPONSE OF ADOLESCENT OFFENDERS WITH PSYCHOPATHY FEATURES

A 2-Year Follow-Up

MICHAEL CALDWELL

University of Wisconsin – Madison

JENNIFER SKEEM

University of California – Irvine

RANDY SALEKIN

University of Alabama

GREGORY VAN RYBROUCK

Mendocino

141 juveniles with high PCL:YV scores followed-up over 2 years and compared two groups of offenders – intensive treatment and treatment as usual

This study
Psychological
offenders
(MJTC)
as usual
in the
a 2-year
with re-
effects
further

Keywords

*Authors
to Michael
Psychology*

“These results raise the prospect that the violence potential of adolescents with significant psychopathy features may be significantly reduced through intensive treatment” (p. 593)

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Problem of Item Overlap Between the Psychopathy Screening Device and Attention Deficit Hyperactivity Disorder, Oppositional Defiant Disorder, and Conduct Disorder Rating Scales

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Content validity requires a clear definition of the construct of interest and the delineation of the construct from similar constructs. Content validity also requires that the items be as specific to the construct. An examination of the items on the Psychopathy Screening Device (PSD), a parent- and teacher-rating scale of childhood psychopathy, symptoms and associated features of attention deficit hyperactivity disorder (ADHD), oppositional defiant disorder (ODD), and conduct disorder (CD). The failure of the PSD in poor discriminant validity with ADHD, ODD, and CD rating scales suggests that additional validation guidelines is required to develop a more useful measure.

Frick and colleagues in a series of studies have investigated psychopathy in children (e.g., Frick, Bodin, & Barry, 2000). The Psychopathy Screening Device (PSD), a parent- and teacher-rating scale of childhood psychopathy, provides the basis for many of their findings. Their development of the PSD, however, shows the problems that can occur with the direct translation of an adult-rating scale to a child scale without careful consideration of preexisting child-rating scales that measure similar constructs. This quote describes the creation of the PSD.

The PSD (Frick & Hare, in press) is a 20-item rating scale designed to measure psychopathy in a way analogous to how this construct has been measured in the adult literature. The PSD was modeled after the Psychopathy Checklist—Revised (PCL—R; Hare, 1991), which is a semistructured interview that has been widely used as a reliable measure of psychopathy in adults. The PSD was designed to ensure that each dimension tapped by the PCL—R was also included in the PSD, unless it was not relevant for children (e.g., irresponsible behavior as a parent, multiple marriages). Each relevant construct from the PCL—R was made into an item on the PSD rating scale that could be scored either 0 (not at all true), 1 (sometimes true), or 2 (definitely true). The PSD was reviewed by the author of the PCL—R (R. D. Hare, personal communication, November 1990) to assess its content validity, and the PSD was made into separate forms for parents and teachers. (Frick, O'Brien, Wootton, & McBurnett, 1994, p. 700)

Although Frick and colleagues consider the items on the PSD to measure psychopathy in children, the PSD items are also similar to the symptoms and associated features of attention deficit hyperactivity disorder (ADHD), oppositional defiant disorder (ODD), and conduct disorder (CD). My purpose is to describe this item overlap and its consequences for the use of the PSD.

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Item overlap occurs when an item on one rating scale represents several more specific items on a second scale. The PSD item "acts without thinking," as an example, provides a general label for more specific ADHD impulsivity symptoms (i.e., "impatience, difficulty delaying responses, blurring out answers before questions have been completed . . . , difficulty awaiting one's turn . . . , and frequently interrupting or intruding on others," American Psychiatric Association [APA], 1994, p. 79). This type of item overlap weakens the discriminant validity of the PSD with a measure of ADHD because the item on the PSD is a general example of the impulsivity items on the ADHD rating scale.

A second type of item overlap occurs when an item on one rating scale represents several more specific items on a second scale. The PSD item "acts without thinking," as an example, provides a general label for more specific ADHD impulsivity symptoms (i.e., "impatience, difficulty delaying responses, blurring out answers before questions have been completed . . . , difficulty awaiting one's turn . . . , and frequently interrupting or intruding on others," American Psychiatric Association [APA], 1994, p. 79). This type of item overlap weakens the discriminant validity of the PSD with a measure of ADHD because the item on the PSD is a general example of the impulsivity items on the ADHD rating scale.

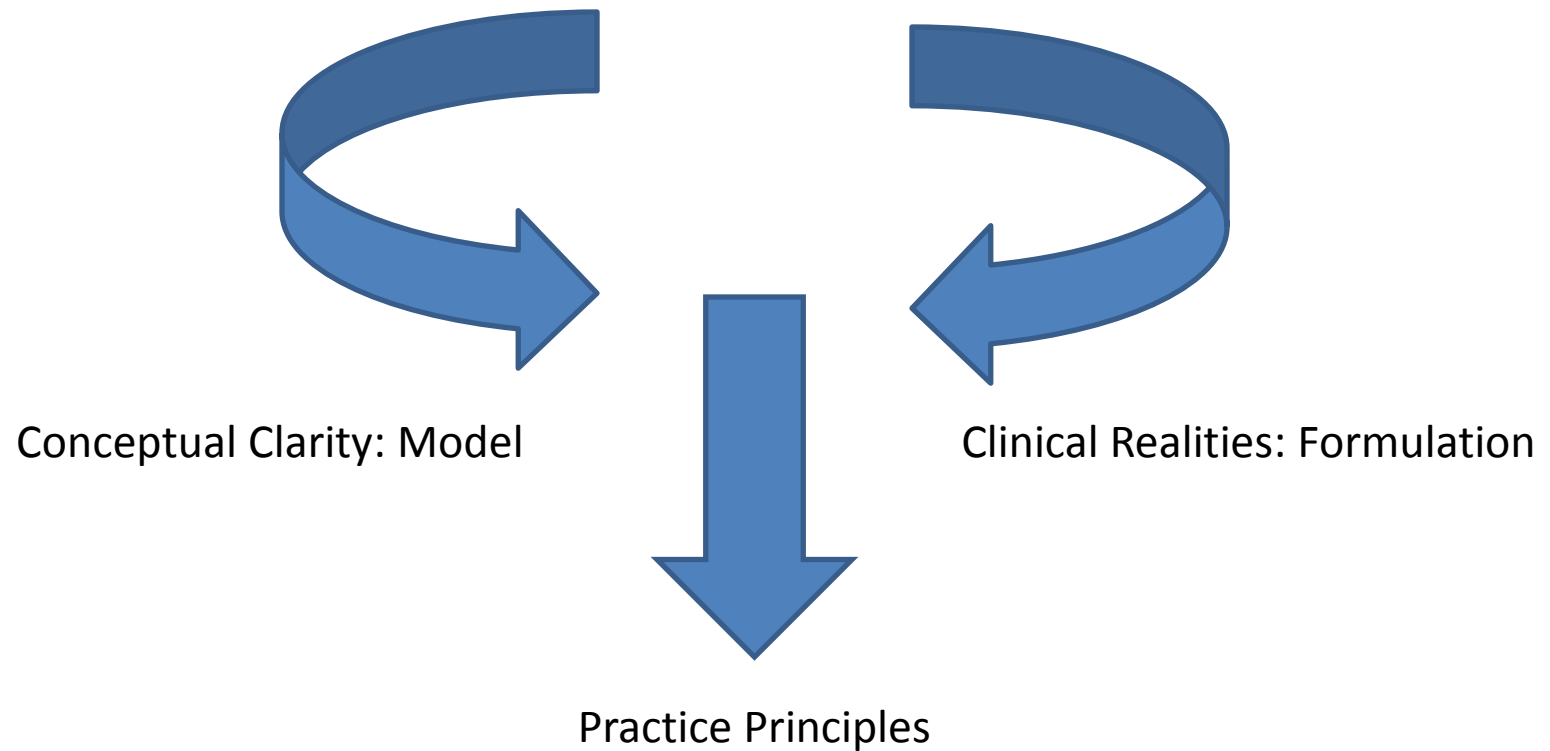
A third type of item overlap involves the situation in which the wording of an item on one rating scale is ambiguous enough to allow the item to be similar to items from two different constructs on a second rating scale. The PSD Impulsivity scale item "engages in risky activities," for example, is relevant to ADHD impulsivity (i.e., "Impulsivity may lead to accidents . . . and to engagement in potentially dangerous activities without a consideration of the possible consequences," APA, 1994, p. 79) as well as to an associated feature of CD (i.e., "Conduct disorder is often associated with . . . reckless and risk-taking acts," APA, 1994, p. 87). This type of item overlap also reduces the discriminant validity of the PSD with ADHD and CD rating scales because the PSD item is similar to the symptoms or associated features of two different disruptive behavior disorders.

APSD is highly correlated with other measures of Disruptive Behaviour Disorders of Childhood

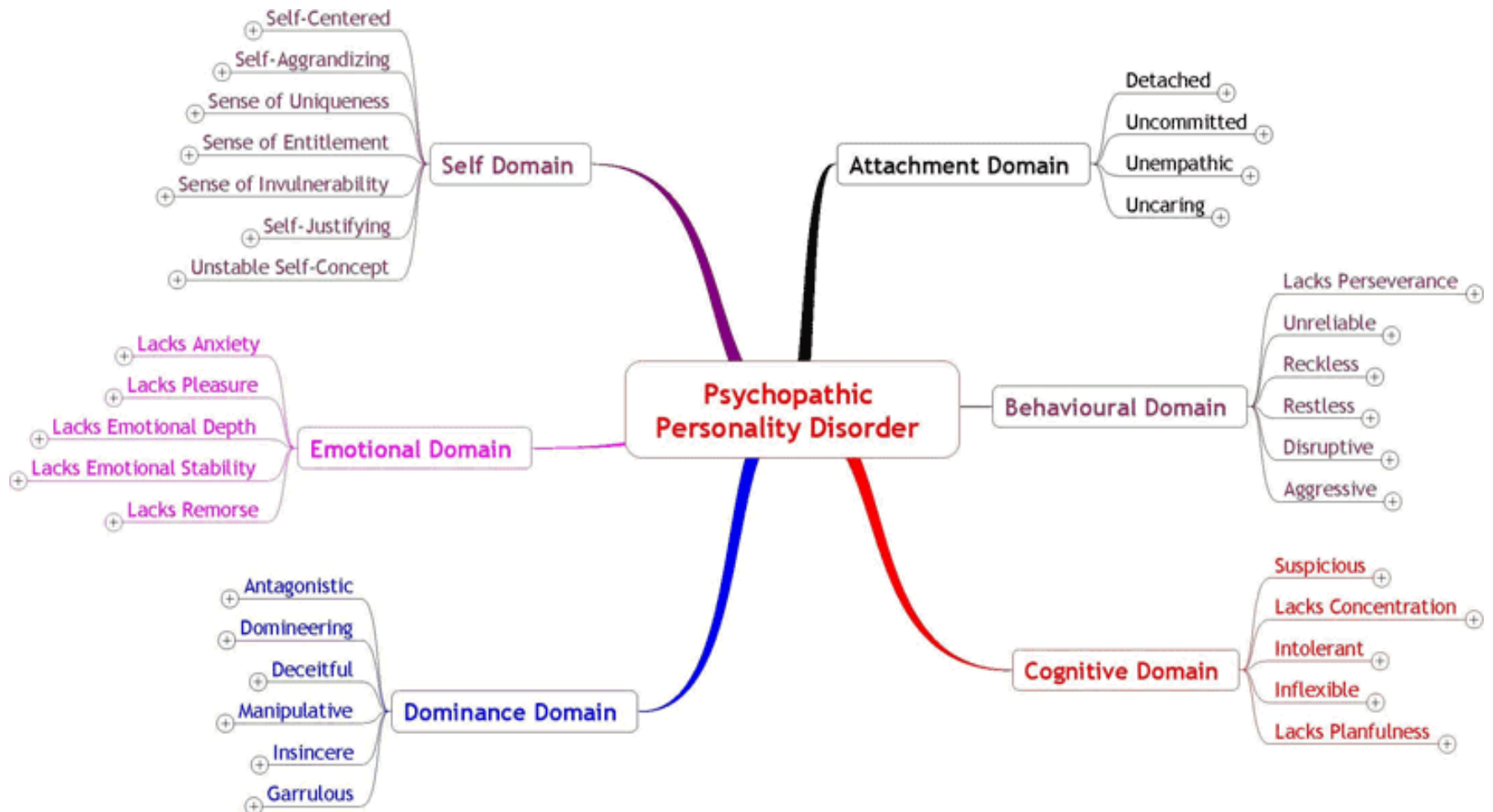
The Peril

- Youth models are derived from the PCL-R (not the construct of psychopathy per se)
- Youth models show some points of convergence with adult findings (on the PCL-R...)
- But also key points of divergence
- There is a narrow focus on the etiological processes in childhood
- Blindsighted to key developmental dilemmas

A Way Forward



A Way Forward: Formulation



Clinical Realities: Formulation



Introduction

Psychopathic personality disorder is both one of the most extensively studied and controversial disorders in the context of forensic psychology. However, since its relationship with antisocial behaviour and criminality has been widely documented, the construct of psychopathy is considered meaningful. Psychopathic personality traits have also been implicated in understanding conduct disordered youth. Measures such as the PCL: YV and ASPD, derived from Hare's PCL-R² are gaining prominence. However, these models have been challenged in relation to conceptual, developmental and ethical concerns, and their utility for understanding youth have been questioned². The Comprehensive Assessment of Psychopathic Personality (CAPP)³ might be useful in overcoming these drawbacks. The CAPP was developed to capture the construct of psychopathy across several domains of human functioning, and defines psychopathy in terms of personality, instead of mixing personality with antisocial behaviour⁴. The current study examined the content validity of the English version of the CAPP³ for use in juvenile samples.

Method

The CAPP model

The CAPP model is comprehensive, clinically driven and describes the full range of symptoms across the six domains of Attachment, Behaviour, Cognition, Dominance, Emotion, and Self. The domains are further divided into 33 symptoms, each defined by a number of trait descriptors⁴. The CAPP has been shown to have good content validity in adults, with most symptoms rated as highly representative and having both high sensitivity and specificity⁴.

Participants

Experts in the field of forensic psychology and psychiatry served as participants. In total, 172 participants were used in this study of which 114 were females and 58 males, with a mean age of 39.22. The number of participants that answered the "boy" questions and "girl" questions differed, some people chose not to answer all questions since they felt they did not have enough experience. More information about participant demographics can be found in table 1.

Table 1. Participant demographics

	Gender						Total
	Attachment	Behaviour	Cognition	Dominance	Emotion	Self	
Number of participants	89	112	9	55	52	54	361 (205 boys, 156 girls)

Materials

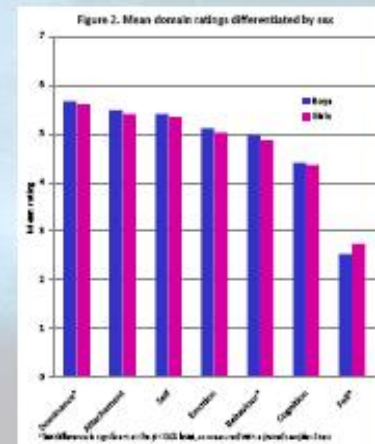
Experts were gathered through professional organizations such as the IAPFMS, the NIP, the EAPL, the RMA and personal contacts. Participants were invited via email to fill out an online questionnaire. The juvenile population researched is aged roughly between 11 and 17. The structure and details of the questionnaire can be found in Figure 1.

Figure 1. Outline and details of questionnaire



Results

Overall, the results of the questionnaire were promising. Except for the trait "lacks pleasure" in boys, and "lacks concentration" in girls, all CAPP traits received a higher prototypicality rating compared to the foil items. The mean item ratings ranged between 3.43 and 6.33 in girls, and between 3.10 and 6.29 in boys. For both sexes, most mean item ratings exceeded the 4.00. A detailed discussion of all mean item ratings is considered too extensive, instead an overview of the mean domain scores is given in Figure 2.



Conclusions

In conclusion, it can be stated that the currently listed CAPP traits seem fairly prototypical among youths with psychopathic-like traits. Furthermore, the traits listed under the "Dominance" and "Behaviour" domains seem to be less prototypical in girls, compared to boys. The results contribute to the idea that the CAPP might be useful in measuring psychopathic-like traits in juveniles, however more research is needed.

¹ Ware, R.D. (1995). The New Psychopathy Checklist-Revised. Toronto, Ontario, Canada: Multi-Health Systems.

² Johnstone, L., & Cooke, D.J. (2004). Psychopathic-like traits in childhood: Perceptual and measurement concerns. *Behavioral Science and the Law*, 22, 100-125.

³ Cooke, D.J., Hart, S.D., Logan, C., & Michie, C. (2006). Comprehensive Assessment of Psychopathic Personality – Institutional Rating Scale (CAPP-IRS). Unpublished manuscript.

⁴ Kiehl, M.J., Cooke, D.J., Michie, C., Holt, H.A., & Logan, C. (in press). The Comprehensive Assessment of Psychopathic Personality (CAPP): Content validation using prototypical analysis. *Journal of Personality Disorders*.

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For more information about the CAPP:

<http://www.maastrichtuniversity.nl>

Narrative

John presents with difficulties in his interpersonal, behavioural and affective functioning. He repeatedly and persistently engages in deceitful behaviour. For example, his parents and teachers have cited numerous examples of him manipulating other children to do his homework for him, purchase items for him, accept the blame for his misdemeanours. However, he also tells lies for no apparent reasons. In the last year, this has been extreme including claiming that his grandmother had died suddenly, that his house had been burgled.....

John has several predisposing factors to developing these problems. He was born premature and was of low birth-weight. He was in special care for 3 weeks. His mother developed post natal depression and she admitted to having problems bonding with John....The parenting style at home is problematic in that it reflects a coercive pattern of interactions. There are no inductive reasoning tactics used....John also exhibits a notable degree of restlessness, impulsivity and activity. He finds it difficult to manage his behaviour....From a social learning perspective, John is experiencing positive outcomes for his behaviour. He has evaded detection on many occasions and he has gained a degree of popularity and status among his peers. These are key perpetuating factors.....In terms of protective factors, John's family are willing to engage and support him. Furthermore, he has considerable maturation to do and it is not possible at this stage to determine long-term prognosis.

Concluding Comments

- Psychopathy is an important construct and the downward extension to youth seems justifiable

But,

- None of the models or methods are entirely satisfactory – but seem uncritically accepted
- A strong measurement model is essential (Johnstone and Cooke, 2004)
- Comprehensive Assessment – CAPP model is an important approach to explore (Dawson et al., in press; Clerx's thesis)
- Rigorous and robust testing
- Pressing need to develop interventions and test effectiveness

Meanwhile a plea

- Don't leave it to the researchers – publish your N=1 and demand better protocols